NIDA International Program

National Institute on Drug Abuse
International Research Interests and Opportunities

NIDA Poster Presentations

at the

2006 NIDA International Forum:

International Trends and Needs in Drug Abuse Research

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NIDA NATIONAL INSTITUTE ON DRUG ABUSE

NATIONAL INSTITUTES OF HEALTH

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institute on Drug Abuse
International Research Interests and Opportunities

International Program

Division of Basic Neuroscience and Behavioral Research

Division of Clinical Neuroscience and Behavioral Research

Division of Epidemiology, Services and Prevention Research

Division of Pharmacotherapies and Medical Consequences of Drug Abuse

Intramural Research Program

AIDS Research Program

Center for the Clinical Trials Network

Special Populations Office

NIDA International Program

Scientific Mission

The NIDA International Program fosters research to take advantage of special or unique opportunities to advance scientific knowledge on drug abuse and addiction. Such special opportunities may include the use of unusual talent, resources, populations, or environmental conditions in other countries that are not readily available in the United States or that augment existing U.S. resources.

Public Health Mission

As the single largest supporter of drug abuse research in the world, NIDA has the opportunity and the responsibility to partner with other countries to provide increased research capacity and science-based information to address addiction and related health issues around the world.

NIDA International Goals

The International Program of the National Institute on Drug Abuse (NIDA):

- Encourages rigorous collaborative and peer-reviewed international research
- Provides professional development opportunities for the international drug abuse research community
- Disseminates NIDA's research methods, findings, and tools to international scientists and organizations.

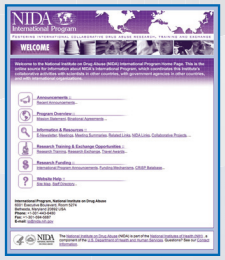
The science-based information generated by NIDA researchers and International Program alumni contributes to international efforts to develop, adopt, and evaluate government policies, prevention programs, and treatment protocols that effectively address drug abuse and its consequences.

International collaborations introduce NIDA grantees to new perspectives and differing attitudes about the fundamentals of drug abuse research. Highly trained scientists from other nations bring unique insights to the Institute's research efforts. National variations also provide NIDA grantees with opportunities to study aspects of drug abuse not available in the United States and to examine the effect of national differences in such areas as policies, drug-using populations, abused drugs, patterns of abuse, special populations, prevention programs, and treatment protocols.

Contact Us

Keep abreast of NIDA International Program activities through the Website, http://www.international.drugabuse.gov, and a bimonthly email listserv.

Steven W. Gust, Ph.D., Director
International Program
National Institute on Drug Abuse
6001 Executive Boulevard, Room 5274
Bethesda, Maryland 20892, U.S.A.
Phone: +1-301-443-6480
Fax: +1-301-594-5687
Email: ip@nida.nih.gov
Website: http://www.international.drugabuse.gov



NIDA International Fellowships and Research Exchange Programs

NIDA International Program Fellowships provide unparalleled research training, while Research Exchange Programs support direct collaborations between NIDA grantees and their colleagues from other countries. Researchers who participate in NIDA international research training and exchange programs benefit from their colleagues' differing perspectives and research approaches to successfully conduct collaborative research nationally, regionally, and globally.

NIDA International Fellowships

- *INVEST Research Fellowships*
  Are competitive, 12-month postdoctoral appointments to U.S. institutions for scientists from other countries. Fellows complete rigorous postdoctoral research training with a NIDA grantee at a U.S. institution, attend NIDA orientations, and participate in scientific meetings. Fellows and their mentors may jointly develop a collaborative research proposal and compete for funding to implement the proposal in the Fellows' home countries. The fellowship is fully funded by NIDA. For more information, please visit the NIDA INVEST Research Fellowship Website at: http://www.international.drugabuse.gov/invest.html.
- *NIDA Hubert H. Humphrey Drug Abuse Research Fellowships*
  Are competitive, 10-month fellowships for mid-career professionals from low- and middle-income countries. Fellows enroll in a mentored academic study at Virginia Commonwealth University, complete a research affiliation and professional experience with a NIDA-supported scientist, and participate in scientific meetings and NIDA orientations. For more information, please visit the NIDA Hubert H. Humphrey Drug Abuse Research Fellowship Website at: http://www.international.drugabuse.gov/hhhdarf.html.

Research Exchange

- *NIDA Distinguished International Scientist Collaboration Awards (DISCA)* and *NIDA U.S. Distinguished International Scientist Collaboration Awards (USDISCA)*
  Are results- and product-oriented awards that allow accomplished drug abuse scientists to work side-by-side on innovative collaborative research projects in the location that best suits their research. Only U.S. citizens and permanent residents are eligible for the USDISCA award, while the DISCA award is limited to applicants from any other country. The competitive awards support 1- to 3-month professional visits. For more information, please visit the NIDA Distinguished International Scientist Collaboration Awards Website at: http://www.international.drugabuse.gov/disca.html.

Grants for International Research

NIDA supports research on the biomedical and behavioral causes, consequences, prevention, and treatment of drug abuse and addiction. NIDA Program Announcements inform scientists about areas of science for which NIDA wants grant applications and about mechanisms for paying grant support. International research is funded through two mechanisms:

Foreign Grants

Allow researchers from outside the United States to compete for funding within the NIH system. The actual research is conducted outside the United States. For a grant to be awarded to a foreign institution, the principal investigator must demonstrate a special opportunity to further drug abuse research through use of expertise, resources, populations, or environmental conditions not readily available in the United States.

Domestic Grants with a Foreign Component

Enable U.S.-based principal investigators to conduct cooperative international studies with foreign partners. The foreign component is part of the original grant; the entire application is scored competitively.

FY 2006 Program Announcements

Program Announcements are listed on the NIDA Website at: http://www.drugabuse.gov/funding

- PAR-06-209 – Cutting-Edge Basic Research Awards (CEBRA) (R21), issued March 10, 2006.
- PAR-06-092 – Imaging Science Track Award for Research Transition (I/START), issued December 9, 2005.
- PA-06-036 – NIDA Phase II Small Business Innovation Research (SBIR [R44]) Competing Renewal Awards, issued December 7, 2005.
- PAS-06-066 – Design, Synthesis, and Preclinical Testing of Potential Treatment Agents for Drug Addiction (R01), issued November 9, 2005.
- PA-06-069 – Health Disparities in HIV/AIDS: Focus on African Americans (R01), issued November 10, 2005.
- PA-06-068 – Drug Abuse as a Cause, Correlate, or Consequence of Criminal Justice Related Health Disparities among African Americans (R01), issued November 10, 2005.
- PAS-06-054 – Non-injection Drug Abuse and HIV/AIDS (R01), issued November 2, 2005.
- PA-06-050 – International Research Collaboration on Drug Addiction (R01), issued October 28, 2005.

Fogarty Center Funding Opportunities for International Training or Research

NIDA currently participates in a number of Fogarty International Center (www.fic.nih.gov) programs:

Research Training Grants

- *AIDS International Training and Research Program (AITRP) Awards* support biomedical and behavioral research training in developing and transitional countries on HIV/AIDS and related tuberculosis (TB), and research on prevention of HIV infection among drug-using populations.
- *International Clinical, Operational, and Health Services Research and Training Awards (ICOHRTA)* support institutional training programs for collaborative, multidisciplinary, international research in developing and transitional countries. *ICOHRTA-AIDS/TB* awards support training where AIDS, TB, or both are significant problems.
- *International Bioethics Education and Career Development Awards (BIOETH)* support institutional grants to develop bioethics curricula on research in low- and middle-income nations.
- The *International Collaborative Genetics Research Training Program (GENE)* provides research training and capacity building in developing and transitional countries with an existing institutional infrastructure available to sustain advances in genetic science.

Research Grants

- The *Global Health Research Initiative Program for New Foreign Investigators (GRIP)* supports the return of NIH-trained foreign investigators to their home countries. Former NIDA INVEST Fellows are eligible to compete for GRIP awards.
- *Brain Disorders in the Developing World (BRAIN)* supports collaborative research and capacity-building projects on brain disorders in developing countries.
- The *Fogarty International Research Collaboration - Behavioral, Social Sciences Award (FIRCA-BSS)* and the companion *Fogarty International Research Collaboration - Basic Biomedical Award (FIRCA-BB)* facilitate collaborative research between NIDA grantees and investigators in developing and transitional countries.
- The *International Cooperative Biodiversity Groups (ICBG) Program* addresses the interdependent issues of drug discovery, biodiversity conservation, and sustainable economic growth.
- The *International Tobacco and Health Research and Capacity Building Program (TOBAC)* supports transdisciplinary research on tobacco consumption in low- or middle-income nations.
- The *Stigma and Global Health Research Program (STIGMA)* supports interdisciplinary research on the etiology, prevention, or mitigation of stigma and related public health outcomes.

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Division of Basic Neuroscience and Behavioral Research (DBNBR)

Mission Statement

The Division of Basic Neuroscience and Behavioral Research (DBNBR) supports basic research on the causes and consequences of drug abuse and addiction, thus providing the scientific foundation for the development and enhancement of prevention efforts and treatment approaches to drug abuse and addiction.

DBNBR Goals

The Division's primary goal is to support basic biomedical and behavioral science research that relates to the public health problem of drug abuse and addiction. DBNBR accomplishes this goal through developing and supporting an extramural program of research in the basic biomedical and behavioral sciences. DBNBR comprises four branches:

- **Behavioral and Cognitive Science Research Branch**
  Minda Lynch, Ph.D., Branch Chief
  mlynch1@nida.nih.gov

  Supports human and animal experimental research within a broad context of behavioral and cognitive factors in drug addiction. Behavioral and cognitive variables are important as antecedent processes in the vulnerability to start, continue, or relapse to drug abuse, as factors in the transition between these stages of abuse, and as consequences or adverse outcomes of abuse.

- **Chemistry and Physiological Systems Research Branch**
  Rao Rapaka, Ph.D., Branch Chief
  rrapaka@nida.nih.gov

  Supports research on all aspects of chemistry and physiological systems affected by drugs of abuse and administers the NIDA Drug Supply Program.

- **Functional Neuroscience Research Branch**
  Nancy Pilotte, Ph.D., Branch Chief
  npilotte@nida.nih.gov

  Supports research that focuses on understanding the regulation of the mechanisms of neurotransmission under normal, drug-exposed, and drug-withdrawn conditions. This branch supports multidisciplinary, integrated approaches to the study of drug abuse, including analysis at the levels of the single cell, protein, circuit, and behavior.

- **Genetics and Molecular Neurobiology Research Branch**
  Jonathan Pollock, Ph.D., Branch Chief
  jpollock@nida.nih.gov

  Supports research on the genetic basis of addiction vulnerability, the fundamental cellular mechanisms that underlie addiction and the response to drugs of abuse, and basic neurobiology.

Website: http://www.nida.nih.gov/about/organization/DBNBR/index.html

Research Interests

Research supported by DBNBR investigates the neurobiological and behavioral effects of drugs of abuse and provides fundamental information to prevent or intervene in drug abuse and addiction. Program areas include:

- *Genetic Basis of Vulnerability of Drug Addiction*. All aspects of the genetic basis of vulnerability to drug addiction are of interest to DBNBR.
- *Models of Addiction*. Neural circuits underlying natural and drug reward; biobehavioral models of craving, relapse, compulsive behavior; neural systems and drug/behavior interaction; vertebrate and invertebrate models.
- *Drug-Induced Neuroadaptaton and Neuropathology in Brain Systems*. Consequences of acute or chronic exposure to addictive drugs; neurotoxicity and its behavioral, physiological, or biochemical consequences; neuroAIDS; adaptation (sensitization, tolerance, plasticity).
- *Pain and Analgesia*. Modulation of acute and chronic pain by brain and spinal mechanisms; antinociceptive actions of opioids, cannabinoids, peptides; cellular processes of pain, analgesia, tolerance; alternative pain therapies (i.e., virtual reality).
- *Cognitive Processes*. Neural mechanisms of drug-induced modification of cognitive processes (learning, memory, attention, associations, decision making)
- *Social Neuroscience*. Drug abuse frequently occurs in a social context, and its consequences typically include a large social component. DBNBR is thus interested in the genetics and neurobiology of social behavior related to drug abuse.
- *Developmental Effects*. Consequences of *in utero* and perinatal drug exposure on the nervous system and other organs; ontogenetic effects throughout the life-span. Adaptive and developmental cellular biology (nonclassical neural communication).
- *Neuropsychopharmacology of Drugs of Abuse*. Relating drugs of abuse to neural systems (mechanism of action of psychomotor stimulants on monoaminergic systems or nicotine and cholinergic neurotransmission); behavioral consequences of receptor subtype activation; regulation of neural systems; function of endogenous systems (endorphins, anandamide, excitatory amino acids) in health and disease.
- *Neuroimmune Relationships, Including Studies of HIV and AIDS Related to Neural or Infectivity Processes*. Cytokine and chemokine modulation of neural function, amplification/diminution of these processes by toxins; interaction of these systems with the immune system and modulation of disease.
- *Innovative Chemical Design of New Entities and Probes*. Molecular probes, imaging agents, receptor selective ligands, potential new drug candidates; development of new ligands with computer-aided drug design or combinatorial chemistry or screening technologies; and structure-activity relationships.

International Focus

DBNBR supports international research and promotes international scientific cooperation and communication through a variety of mechanisms:

- DBNBR supports about 1.5 million dollars of international research annually.
- DBNBR sponsors numerous major international meetings, including the College on the Problems of Drug Dependence (CPDD) Annual Meeting and the International Narcotics Research Conference (INRC).
- DBNBR also co-sponsors meetings with organizations that promote international research (e.g., CPDD, INRC, International Union of Pharmacology, International Brain Research Organization, International Cannabinoid Research Society, and International Drug Abuse Research Society).
- DBNBR participates in the Interagency Committee on Drug Control (ICDC), which makes international scheduling recommendations and resulting obligations with respect to drug control.
- DBNBR oversees the NIDA Drug Supply Program, under which several hundred investigators, including international researchers, receive compounds free-of-charge for research purposes.

Funding Opportunities

International Neuroscience Fellowship (INF)

DBNBR and three other NIH Institutes—the National Institute of Neurological Disorders and Stroke (NINDS), the National Institute of Environmental Health Sciences (NIEHS), and the National Institute on Aging (NIA)—have created INF (PAR-06-227; http://grants.nih.gov/grants/guide/pa-files/PAR-06-227.html) to provide 1 to 2 years of research training in the United States for qualified junior or mid-career foreign neuroscientists. The INF will advance the training of qualified foreign neuroscientists by enhancing their basic or clinical research skills in a research setting in the United States, preparing awardees for future leadership positions in research, academia, or public health institutions in their home countries. It is hoped that the INF will enhance the quality and quantity of international neuroscience research, while fostering long-lasting collaborations between foreign and U.S. neuroscientists.

International Neuroscience Fellowship research proposals focusing on, but not limited to, the following areas are encouraged:

- The transition to addiction (i.e., from controlled use to uncontrolled, compulsive use of drugs).
- The consequences of drug abuse and addiction (e.g., drug-induced neuroadaptations, neurotoxicity, altered cognitive and behavioral processes, developmental deficits).
- The antecedents to drug addiction and relapse (e.g., genetics, stress, environmental precipitants).
- The neurobiological bases of pain and its alleviation by opiates, other analgesics, adjunctive medications, and alternative therapies (e.g., acupuncture, virtual reality).
- The complex interrelationship among HIV/AIDS progression, transmission, and drug abuse.

Applicants must have a sponsor in the United States who is affiliated with an eligible U.S. organization, be proficient in English, hold a doctoral or equivalent degree, and procure both the endorsement of their home institution and a guaranteed appointment in an institution in their home country upon completion of the fellowship. Preference will be given to applicants from low- to middle-income countries.

Contact Us

David Shurtleff, Ph.D.
Director
Division of Basic Neuroscience and Behavioral Research
National Institute on Drug Abuse
6001 Executive Boulevard
Room 4273, MSC 9555
Bethesda, Maryland 20892, U.S.A.
Phone: +1-301-443-1887
Fax: +1-301-594-6043
Email: dshurtle@nida.nih.gov

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Division of Clinical Neuroscience and Behavioral Research (DCNBR)

Mission Statement

The Division of Clinical Neuroscience and Behavioral Research (DCNBR) aims to provide a translational approach to drug abuse within a clinical research context to advance our understanding of brain, behavior, and health.

We conceptualize drug abuse as a human developmental neurobiological disorder and believe that scientific approaches that view drug abuse from this perspective hold great promise for informing etiology, prevention, and treatment.

DCNBR Goals

The overarching goal of DCNBR is to promote high-caliber research to identify the key developmental, genetic, social, and brain mechanisms associated with drug abuse, and to translate resultant findings into therapeutic interventions that decrease the extent and burden of drug abuse. We believe that conceptualizing drug abuse as a human developmental neurobiological disorder will generate important scientific findings that advance NIDA's mission to lead the Nation in bringing the power of science to bear on drug abuse and addiction.

To accelerate progress toward this goal, DCNBR's organizational structure intentionally promotes collaboration and translation across three branches: Behavioral and Brain Development Branch (BBDB), Clinical Neuroscience Branch (CNB), and Behavioral and Integrative Treatment Branch (BITB). Highlights from recent published reports exemplify the developmental, mechanistic, and translational goals of DCNBR.

- **Behavioral and Brain Development Branch**

  Results show greater memory impairment and concomitant functional aberrations (via fMRI) during nicotine withdrawal among adolescent smokers who experienced, compared to those who did not, gestational exposure to maternal smoking (Jacobsen, Slotkin, Westerveld, Menci, & Pugh. *Neuropsychopharmacology*, online publication 7 December, 2005).

- **Clinical Neuroscience Branch**

  Among treatment-seeking methamphetamine addicts, individual differences in activation of specific brain regions (e.g., right insula and left cingulated gyrus via fMRI) correctly predicted 91% and 94% of remitters and relapsers, respectively, after 1 year (Paulus, Tapert, & Schuckit. *Archives of General Psychiatry* 62, 761-768, 2005).

- **Behavioral and Integrative Treatment Branch**

  Smokers who received both extended psychological and extended pharmacotherapy were most likely to be smoke free at the 1-year follow-up. The 50% abstinence rate among this group is approximately double that of the most intensive and widely accepted treatments for nicotine addiction (Hall, Humfleet, Reus, Munoz, & Cullen. *American Journal of Psychiatry* 161, 2100-2107, 2004).

Research Interests

- **Behavioral and Brain Development Branch**

  The Behavioral and Brain Development Branch (BBDB) supports research, research training, and career development designed to increase understanding of how human developmental processes and outcomes are affected by drug use/exposure and related factors (e.g., environment, HIV/AIDS), and to increase understanding of the role of human brain and behavioral processes in drug use, abuse, addiction, relapse, and associated risk behaviors. BBDB also supports research on interventions designed to prevent or ameliorate negative consequences of drug use/exposure and related factors on human development.

- **Clinical Neuroscience Branch**

  The Clinical Neuroscience Branch (CNB) supports research, research training, and career development on the clinical neuroscience and biological etiology of drug abuse and addiction. The CNB accomplishes this mission by promoting research for clinical (human) and parallel infra-human investigations integrating neurobiology, cognitive/behavioral neuroscience, and genetics. The scope of research supported by CNB includes studies of both normal and dysfunctional processes associated with all aspects of drug use from predisposition through drug seeking, initiation, abuse, addiction, and relapse. CNB serves a translational purpose by drawing upon advances in preclinical research to provide the foundation for human investigations of brain, behavior, and genetics that can inform prevention and treatment strategies.

- **Behavioral and Integrative Treatment Branch**

  The Behavioral and Integrative Treatment Branch (BITB) supports broad research, research training, and career development programs directed toward: (1) development, refinement, and testing of behavioral/psychosocial treatments and complementary/alternative interventions for drug abuse, alone and in combination with medications; (2) development, refinement, and testing of interventions to promote adherence to treatment; (3) development, refinement, and testing of HIV prevention interventions for use in drug abuse treatments; (4) development and validation of screening and diagnostic methods and instruments; and (5) translational treatment research including the development of behavioral interventions drawing on findings from basic research as well as development of behavioral interventions to make them more amenable to practice and community settings.

International Focus

- **Behavioral and Brain Development Branch**
  - Long-term (infancy to adolescence and early adulthood) outcomes associated with *in utero* exposure to marijuana and tobacco in Canada
  - Prenatal methamphetamine exposure and early (infant) developmental outcomes in New Zealand
  - Developmental outcomes of prenatal exposure to MDMA/"Ecstasy" in England
- **Clinical Neuroscience Branch**
  - Establishment of brain imaging capabilities in South Africa
  - Training investigators from China, South Korea, Ireland, and South Africa in brain imaging
  - Investigation of cognitive dysfunction in drug abusers in Bulgaria and Russia
  - Neuroimaging studies of MDMA, methamphetamine, and cannabis abusers
- **Behavioral and Integrative Treatment Branch**
  - Testing the feasibility of delivering evidence-based behavioral treatments in pharmacological drug abuse treatment clinics in two sites in Vinnitsya, Ukraine
  - Testing a screening and brief advice intervention for drug-using adolescents in primary care settings in the Czech Republic
  - Testing a method of training community-based treatment providers in South Africa to deliver cognitive-behavioral therapy for drug abusers
  - Modifying and pilot testing a cognitive-behavioral therapy for HIV+ drug abusers in Trinidad and Tobago, with emphasis on developing a culturally relevant behavioral treatment approach
  - Incorporating tobacco-relevant content into the medical school and other health professional curricula, to engage opinion leaders in tobacco cessation activities and to encourage and promote quitting among health professionals in India and Indonesia

International Funding Priorities

- **Behavioral and Brain Development Branch**
  - Health and development of drug- and HIV/AIDS-exposed children and youth
    - Drug-exposed includes: *in utero* exposure, drug use during childhood or adolescence, and exposure to drug-using environments
    - HIV/AIDS-exposed includes: HIV-infected, HIV/AIDS-exposed *in utero* but not infected with HIV, and affected by HIV/AIDS (i.e., living with caregivers, family, peers, or in communities with HIV/AIDS)
- **Clinical Neuroscience Branch**
  - Train non-U.S. investigators in state-of-the-art methods in clinical and cognitive neuroscience
  - Research targeting unique populations or expertise not available in the United States to advance understanding of clinical neuroscience of drug addiction
- **Behavioral and Integrative Treatment Branch**
  - Research utilizing unique technologies, populations, or expertise not available in the United States to develop and/or test behavioral and/or HIV risk reduction interventions
  - Studies focused on improving adherence to HIV treatment in different cultures or populations
  - Studies of ways to disseminate behavioral interventions internationally via distance learning or other paradigm

Contact Us

Kevin P. Conway, Ph.D.
Associate Director
Division of Clinical Neuroscience and Behavioral Research (DCNBR)
National Institute on Drug Abuse
6001 Executive Boulevard, Suite 3155
Bethesda, Maryland 20892-9593, U.S.A.

Telephone: +1-301-402-1817
Fax: +1-301-443-6814
Email: kconway@nida.nih.gov

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Division of Epidemiology, Services and Prevention Research (DESPR)

Mission Statement

To improve public health by promoting integrated approaches to understand and address interactions between individuals and environments that contribute to the continuum of problems related to drug use and addiction. DESPR consists of three branches: Epidemiology Research Branch (ERB), Services Research Branch (SRB), and Prevention Research Branch (PRB). The ultimate goal is to develop scientific knowledge with clear applications to public health practice and policy.

DESPR Goals and Research Foci

• Epidemiology Research Branch (ERB)

• Goal:

ERB promotes a national and international extramural research program that examines individual, developmental, and social/environmental factors associated with drug abuse. Findings generated will be used to inform prevention and services research to reduce the burden of drug abuse on the nation's public health.

• Research Focus:

- Basic Epidemiologic Research: Studies that assess and examine rates (e.g., prevalence, incidence), emerging and current patterns, and trends of drug use/abuse and associated behavioral, social, and health consequences (e.g., HIV/AIDS, crime) in general and defined populations, with special attention to health disparities issues.
- Etiology: Studies of the origins of and pathways to drug abuse focusing on studies of individual-, familial-, and community-level risk and protective factors and their interactions with emphasis on human developmental processes associated with initial drug use and the transition from drug use to drug addiction, contextual factors, genetic factors, and comorbidity.
- Context and Consequences: Studies of the dynamic interaction between contextual- and individual-level factors in contributing to and/or protecting against the adverse behavioral and social consequences as well as interventions that attempt to mitigate drug use/abuse and its adverse consequences.
- Methodology: Methodological studies to improve the accuracy, efficiency, scope, timeliness, and analytical field of drug abuse epidemiologic data and research in the areas specified above.

• Services Research Branch (SRB)

• Goal:

The SRB mission is to enhance the access to and delivery of effective drug treatment care at a reasonable cost to all those who need it, and to eliminate health disparities by meeting the unique treatment needs of individuals—including co-occurring psychiatric and other medical problems.

• Research Focus:

- Organizational Factors: Factors that affect the delivery of drug and/or alcohol abuse prevention, treatment, and related services: social factors, personal behaviors and attributes, financing, organization, management, and health technologies.
- Access and Quality: Dimensions of drug and/or alcohol abuse prevention, treatment, and related services: accessibility, utilization, quality, effectiveness, and costs.
- Research Implementation/Adoption: Processes of
  - Blending evidence-based drug and/or alcohol abuse prevention and treatment practices into community-based care, and conversely,
  - Translating the questions of concern to practitioners into rigorous research.
- Research Tools: Development and refinement of research tools—including study designs, measurement instruments, and data analytic methods—to facilitate higher quality health services research on drug and/or alcohol abuse.

• Prevention Research Branch (PRB)

• Goal:

The PRB works to improve the nation's public health status by supporting a program of basic, clinical, and services research on the development, testing, and translation of prevention interventions that target the initiation of drug use, the progression to abuse and dependence, and the transmission of HIV infection among diverse populations and settings.

• Research Focus:

- Basic Prevention Science Research: Small-scale pilot or feasibility studies that
  - Test emerging findings from the basic and behavioral sciences for their potential in augmenting or developing prevention programs, practices, and policies and
  - Compare intervention and control group participants to better understanding the underlying biological, social, and environmental mediators that contribute to intervention success.
- Efficacy and Effectiveness Research: Randomized control or equivalent design studies that test
  - The efficacy of innovative theory-based or empirically derived prevention approaches using relatively small, well-defined and controlled samples and
  - The effectiveness of such approaches in controlled studies with larger, more diverse samples in real-world settings. Attention to factors that moderate or mediate program outcomes, including those related to service delivery, is essential.

Continued from previous column

- Systems Research: Studies that take effective interventions to scale in existing or new service delivery systems to examine factors that affect program sustainability and dissemination, including the selection, adoption, adaptation, organization, management, financing, and delivery of the prevention services.
- Methodology: Methodological studies that consider the complex issues specified in the areas above, such as missing data in randomized trials, intervention fidelity, and multi-level longitudinal analyses.

International Foci and Funding Opportunities

http://www.drugabuse.gov/about/organization/despr/GrantsInfo.html

• Epidemiology Research Branch (ERB)

ERB supports a developing program of international research on the etiology and epidemiology of drug abuse and co-occurring behavioral, developmental, social, and health and medical problems of drug abuse, including HIV/AIDS and other blood-borne infections. ERB's current international research portfolio includes both grants and small research supplements in such countries as Canada, Brazil, Argentina, Nicaragua, Chile, Costa Rica, and along the U.S.-Mexico border, Russia and Eastern Europe (e.g., Lithuania and Bulgaria), Vietnam, India, China, Tanzania, South Africa, and Malawi. In addition, through NIDA's National Hispanic Science Network, ERB is facilitating the establishment of a Latin American epidemiology network on drug abuse. Along with the other DESPR branches, ERB is fostering an important and growing collaborative research relationship with the NIH Fogarty International Center, partly through NIDA's participation in a number of FIC program initiatives and announcements, and partly through its own outreach to promising international scientists to encourage their development and submission of inter- and multidisciplinary epidemiological research proposals in response to Fogarty's requests for applications and program announcements.

• Services Research Branch (SRB)

SRB currently has a number of international grants, mostly in collaboration with the Fogarty International Center, located in Africa, Southeast Asia, Central America, and North America. Areas of research include improving the quality of treatment services for HIV and TB; training clinical researchers to conduct services research; providing treatment services to individuals using tobacco/nicotine; and development of a drug use screening instrument.

• Prevention Research Branch (PRB)

PRB currently supports a number of international research training studies, in collaboration with the Fogarty International Center, in China, India, Thailand, Vietnam, Myanmar (Burma), and Laos. In addition, the branch supports the ICOHRTA training program in China as well as a number of HIV/AIDS grants and cooperative agreements in South Africa, Thailand, Norway, Russia, and Canada. Among these is a study conducted by Marion Forgatch of the Oregon Social Learning Center (OSLC) in collaboration with the Norwegian Center for the Study of Behavioral Problems and Innovative Practice in Oslo and the Institute for Social Research. The study is evaluating the adoption, adaptation, and implementation of the OSLC parent management training (PMTO) throughout Norway. PMTO is an efficacious theory-based intervention that teaches parents child-rearing strategies that prevent deviant child behavior and promote healthy family development. A unique aspect of this study is that Norway is paying for the implementation and NIDA is supporting the research. Another example is a study conducted by Edward Smith of Pennsylvania State University. Dr. Smith is collaborating with colleagues in South Africa in conducting a randomized control efficacy study of a program he developed titled HealthWise: Learning Life Skills for Young Adults. The program is a 2-year school-based universal drug abuse and HIV/AIDS prevention intervention for adolescents 14 to 16 years old. Finally, Zita Lazzarini, University of Connecticut, is studying the World Health Organization's rapid policy assessment and response (RPAR) process in relation to legal and structural barriers to HIV prevention among injection drug users (IDUs) in Central and Eastern Europe. The RPAR builds on the rapid assessment and response process through the integration of legal and policy research that focuses on the impact of these factors on the health risks of IDUs. The study is a cross-national study of the implementation of the RPAR in Ukraine, Poland, and Russia to examine how structural barriers operate under a variety of contrasting conditions—epidemic, economic, and political/legal.

Contact Us
Jack B. Stein, Ph.D.
Deputy Director
Division of Epidemiology, Services and Prevention Research (DESPR)
National Institute on Drug Abuse
6001 Executive Boulevard
Room 5153, MSC 9589
Bethesda, Maryland 20892-9589, U.S.A.

Phone: +1-301-443-6504
Fax: +1-301-443-2636
E-mail: jstein1@nida.nih.gov

NIDA NATIONAL INSTITUTE ON DRUG ABUSE
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Division of Pharmacotherapies and Medical Consequences of Drug Abuse (DPMCDA)

Mission Statement

To improve drug abuse treatment throughout the nation using science as the vehicle to ensure the identification, evaluation, and development of new and improved treatments to include pharmacotherapeutic and immunological treatment agents which will address the unmet needs of the drug abuse treatment community, and support research on the medical consequences of drug abuse and infections including HIV.

DPMCDA Goals

The Division of Pharmacotherapies and Medical Consequences of Drug Abuse (DPMCDA) was created to fulfill NIDA's congressional mandate to establish a medications development program (MDP). The MDP is modeled after a typical pharmaceutical company with the ability to conduct all phases of medications development, from synthesis and screening of potential drug entities to preparing submissions for New Drug Applications (NDAs). Our goal is to develop proprietary compounds and marketed medications that show promise for the treatment of drug dependence, employing two approaches to obtaining compounds: top down (marketed medications) and bottom up (basic science, discovery). DPMCDA has an extensive clinical trial infrastructure administered through contracts and interagency agreements. This infrastructure is capable of conducting Phase I clinical pharmacology studies and Phase II and Phase III multicenter clinical trials.

DPMCDA actively seeks collaborators (from pharmaceutical, academic research institutions, and other commercial entities) to exchange resources, expertise, and data for the progression of a medications project. The Division utilizes six types of agreements to accomplish these goals and has had several successful collaborations with pharmaceutical companies.

Medications development projects must undergo a series of multilevel concept and safety reviews and requirements which include special expert consultants reviews, Institutional Review Boards, Data Safety Monitoring Boards, the U.S. Food and Drug Administration, and medical (Serious and Adverse Event Reporting) and protocol monitors (GCP adherence).

DPMCDA's medications development program has a proven success record – it has obtained three NDA approvals:

- LAAM
- Buprenorphine
- Buprenorphine/Naloxone

DPMCDA's research activities are administered through the following branches:

- Medical Consequences Branch
- Medications Research Grants Branch
- Chemistry and Pharmaceutics Branch
- Clinical Medical Branch
- Medications Discovery and Toxicology Branch

Research Interests

DPMCDA currently operates five medications development programs (MDPs):

- **Cannabis** – New scientific findings prompted DPMCDA to start this MDP recently:
  - Availability of newly marketed medications whose mechanisms of actions may have potential therapeutic effects on the clinical manifestations of cannabis dependence.
  - Recent discovery of an endogenous cannabinoid system with specific receptors and endogenous ligands.
  - The availability of genetically engineered knockout mice that lack functional cannabinoid receptors permits us to study genetic predispositions to the effects of cannabinoids.
  - Reliable preclinical models have been developed to study the rewarding and addiction-producing effects of THC.
  - New chemical entities, some of them already being investigated at the clinical level, target the cannabinoid system and have potential therapeutic benefits.
- **Cocaine** – In its largest MDP effort, the Division and its contractors have tested 68 pharmacotherapies to treat cocaine dependence. Several of these pharmacotherapies (including Naltrexone) have shown some efficacy in double blind, placebo-controlled studies and are undergoing further testing via the grants and contract mechanisms.
- **Methamphetamine** – The second largest MDP program currently funds 14 Phase I studies and 4 Phase II studies via the grants and contracts mechanisms.
- **Nicotine**
- **Opiates**

DPMCDA also supports research and development of monoclonal antibodies or vaccines for the treatment of substance use disorders, drug overdose indications, and nicotine dependence.

DPMCDA is interested in the following types of targets:

- D1 receptor agonists
- D3 receptor agonists and antagonists
- Glutamate modulators
- CRF-1 antagonists
- CB-1 antagonists
- GABA-mimetics
- Orexin receptor antagonists
- VMAT-2 inhibitors (methamphetamine)
- Muscarinic M5 agonists and antagonists
- ORL-1 receptor agonists

Current International Projects

Baum, DA16551 – Botswana clinical trial of antioxidant micronutrients to slow HIV disease progression

Bell, DA13127 – Underlying pathophysiology of neuroAIDS in drug abusers

Dobs, DA14098 – (under consideration) Study metabolic (including nutritional) and endocrine disorders in Chinese IDUs

Goodkin, DA18085 – Argentine study of neuroAIDS (HIV-associated), minor motor cognitive disorders (MMCD), and HIV-dementia (HAD); MMCD and HAD diagnostic training for clinicians

Gorbach, DA13868 – (1) Pilot work on metabolic (nutritional) consequences of HIV infection and substance abuse in India and Vietnam; (2) (under consideration) study nutritional consequences of HIV infection and substance abuse in Argentina through the Center for Drug Abuse and AIDS Research

Kumar, DA13550 – A pilot study of cognitive impairment of marijuana and HIV infection in India

Lai, DA15020 – Cardiovascular complications of methamphetamine and HIV infection in China

Lai, DA21119, China MACS – Exploratory study of a multicity cohort of SMS in China

Morse, DA15024 – Interactions between traditional medicine and antiretroviral drugs in HIV-infected substance abusers

Kosten, DA018863-01 – A 4-year study to evaluate Naltrexone, Lofexidine, and their combination in conjunction with psychosocial treatment to prevent relapse in Russian detoxified heroin addicts

Fischer, DA018417-02 – Assessing in Austrian opioid-dependent pregnant women the efficacy of Buprenorphine for reducing neonatal abstinence syndrome relative to methadone

Selby, DA015741-02 – Assessing in Canadian opioid-dependent pregnant women the efficacy of Buprenorphine for reducing neonatal abstinence syndrome relative to methadone

Woody, DA017317-01 – Comparison of impact of depot injectable Naltrexone vs. oral Naltrexone on retention and outcome in Russian detoxified heroin addicts

Margaret Compton, DA15463-02 – Analyzing and interpreting the Electric Stimulation technique, which is a valid control for the hyperalgesia measures obtained in this Australian collaboration

Raskin, TW006674 – A 5-year study to facilitate the development of the natural product-based pharmaceutical capabilities in Uzbekistan and Kyrgyzstan while encouraging biodiversity conservation and exploration

International supplements:

Covey, DA13490 – Testing the efficacy of bupropion SR versus placebo for maintenance therapy in a sample of 100 Filipino smokers

Buydens-Branchey, DA13264 – Testing the efficacy of Buspirone for inpatient opiate detoxification among Belgian women

Kleber, DA009236 – Studying an implant formulation of Naltrexone in Australia

Husbands, DA007315 – Designing and synthesizing new compounds as potential pharmacotherapies for cocaine addiction (United Kingdom)

International Opportunities

NIDA supports research on drug abuse and co-occurring infections such as HIV, hepatitis C, TB, STDs, and others. It invites applications for international collaborative research on drug abuse and drug addiction, medical consequences of drug abuse, and behavioral interventions. DPMCDA has funded international collaborative research through the following NIDA Program Announcements (PAs):

- International Research Collaboration on Drug Addiction, PAS-03-023. The succeeding announcement, PA-06-050, extended the PA until January 3, 2009, soliciting proposals for collaborative research on drug abuse and addiction that take advantage of special opportunities that exist outside the United States, including research on HIV/AIDS and drug abuse, methamphetamine abuse, inhalant abuse, smoking during pregnancy, and drugs and driving.
- Collaborative Clinical Studies in Drug Abuse, PAR-01-039. The succeeding announcement, PAR-04-073, extended the PA until February 17, 2007, requesting researcher proposals implementing common clinical trials across different sites in order to study patient outcomes, patient factors, provider factors, setting characteristics, interactions of these, or other effects where pooled samples are appropriate and necessary for the hypotheses.

Another source for international funding is the HIV Network for Prevention Trials (HIVNET), a multicenter (with sites located both in the United States and abroad), collaborative research network whose mission is to carry out HIV prevention efficacy trials. The HIVNET evaluates the safety and effectiveness of promising interventions to prevent the transmission of HIV. Sites recruit patients for research and provide HIV counseling and testing, risk-reduction counseling, and referrals to health care providers. HIVNET can be accessed via http://www.scharp.org/ceg/.

The U.S. National Institutes of Health Fogarty International Center (http://www.fic.nih.gov) offers training and international research grants. The DPMCDA is considering a grant proposal to conduct research and training on the neuroscience of suicide and addictive behaviors.

Contact Us

Aida Klun, M.B.A.
Program Analyst
Division of Pharmacotherapies and Medical Consequences of Drug Abuse
National Institute on Drug Abuse
6001 Executive Boulevard
Room 4135, MSC 9551
Bethesda, Maryland 20892, U.S.A.

Phone: +1-301-443-1122
Fax: +1-301-443-2599
Email: ak102w@nih.gov

NIDA NATIONAL INSTITUTE ON DRUG ABUSE
The Science of Drug Abuse & Addiction

Intramural Research Program

International Activities and Interests

Mission Statement

Promote international collaborative research that facilitates the elucidation of brain mechanisms underlying drug addiction and relapse and the development of new treatment modalities.

Provide extended predoctoral and postdoctoral training for foreign investigators and collaborative research experience for senior foreign investigators in state-of-the-art techniques for studying drug addiction at the molecular, neurobiological, preclinical and clinical levels.

Behavioral Neuroscience Research Branch

Roy Wise, Ph.D. – Branch, Section Chief
Steven R. Goldberg, Ph.D. – Section Chief
Toni Shippenberg, Ph.D. – Section Chief
Eliot Gardner, Ph.D. – Section Chief
Yavim Shahan, Ph.D. – Section Chief

Have

- State-of-the-art animal behavioral screening models for preclinical pharmacological profiles believed to be predictive of anti-addiction, anti-craving, and anti-relapse efficacy at the human level.
- State-of-the-art *in vivo* and *ex vivo* models for assessing neurochemical and neuroanatomical basis for elucidating underlying mechanisms for addiction and relapse.
- State-of-the-art primate cannabinoid (THC) and nicotine self-administration models to assess potential human abuse liability efficacy and determine pharmacological profiles of potential new anti-smoking or anti-cannabis medications.

Seek

- Highly potent and selective receptor agonists, partial agonists, and antagonists for different receptor subtypes thought to modulate or mediate addictive processes.
- New experimental approaches to assess interactions between the different neurotransmitter-neuromodulator systems, receptor-receptor interactions, and heteromeric receptor complexes.
- New cannabinoid agonists and antagonists, compounds that selectively modulate the actions of endogenous cannabinoid systems, and new compounds that might serve as anti-smoking or anti-cannabis medications.

Recent Examples

- Collaborations with University of Barcelona, Spain; Istituto Superiore di Sanita, Rome, Italy; Universities of Athens and Ionina, Greece; University of Bonn, Germany; Karolinska Instituter, Stockholm, Sweden; and University of Coimbra, Portugal, on adenosine as a key modulator of brain functions and the behavioral effects of psychostimulants, opioids, and cannabinoids.
- Relative roles of adenosine A1 and A2A receptors in the behavioral actions of caffeine.
- Roles of interactions between adenosine A1 and A2A receptors and dopamine receptors in tolerance to caffeine and in the potentiation of the behavioral effects of other psychostimulants by chronic caffeine exposure.
- Control of striatal glutamatergic neurotransmission by adenosine A1-A2A heteromeric receptor complexes.
- Adenosine A2A and dopamine D2 heteromeric receptor complexes and their function.
- Role of functional heteromeric complexes involving adenosine A2A and cannabinoid CB1 receptors involved in the behavioral effects of delta-9-tetrahydrocannabinol (THC), the endogenous CB1 ligand anandamide, and other synthetic cannabinoid CB1 receptor agonists.

Molecular Neurobiology Branch

George Uhl, M.D., Ph.D. – Branch, Section Chief

Have

State-of-the-art molecular genetics of addictions and related conditions in humans and mouse model systems.

Seek

- Well-characterized samples from substance-dependent individuals and matched control individuals.
- Well-characterized samples from individuals with individual differences in pain, mnenomic systems, sleep variants, or Parkinson's Disease (PD).
- Collaborations in characterizing knockout mice with related phenotypes.

Recent Examples

- Humans
  - Collaboration with Japanese Genetics of Drug Abuse Consortium, which offers more than 24 million person/genotype equivalents from amphetamine abusers and ethnically matched controls.
  - International multi-site collaborations for samples with narcolepsy has confirmed second human gene variant for this disorder.
  - International multi-site collaboration for PD confirmed and ruled out several candidate gene loci for PD.
- Mice
  - International collaboration with Japanese investigators on studies of mouse models for human allelic variants that differ between addicts and control individuals.

Cellular Neurobiology Research Branch

William Freed, Ph.D. – Branch, Section Chief
Barry J. Hoffer, M.D., Ph.D. – Section Chief

Have

- State-of-the-art methods for microarray and Q-PCR assessment of gene expression and proteonomics for identification of biomarkers using clinical samples from drug-dependent individuals.
- Cell lines of many types and differentiated ES cells which respond to drugs of abuse *in vitro*.

Seek

- Will provide cell lines to foreign investigators for *in vitro* studies, as needed, without further obligation, or will collaborate on *in vitro* studies (e.g., treating cell preparations with drugs and providing protein or RNA preparations for further experiments).
- Well-characterized post-mortem human brain samples from substance-dependent and matched control individuals.
- Determination of changes in gene expression which occur in human substance abusers.

Medications Discovery Research Branch

Jonathan Katz, Ph.D. – Acting Branch Chief, Section Chief
Amy H. Newman, Ph.D. – Section Chief
Richard Rothman, M.D., Ph.D. – Section Chief

Have

Novel ligands, including irreversible, fluorescent, and biotinylated compounds, that have high affinity and selectivity for the (1) dopamine transporter, (2) dopamine D3 receptor, or (3) sigma1 receptor.

Seek

New collaborative opportunities to use these novel molecular tools in models of drug abuse that will contribute to our understanding of the molecular basis of cocaine addiction and provide new strategies for drug design.

Recent Example

Collaboration with the University of Copenhagen, where our high-affinity fluorescent ligands are being used to visualize the dopamine transporter and follow trafficking at the cellular level.

Molecular Neuropsychiatry Research Branch

Jean Lud Cadet, M.D. – Branch, Section Chief
Barry J. Hoffer, M.D., Ph.D. – Section Chief

Have

State-of-the-art methods for cDNA microarrray analysis of gene expression and proteonomics for identification of biomarkers using clinical samples from drug-dependent individuals.

Seek

Well-characterized samples from drug-dependent individuals and matched control individuals.

Recent Example

Current collaboration with Université de Poitiers, France, studying the effects of methamphetamine using cDNA array and other molecular techniques.

Neuroimaging Research Branch

Elliot Stein, Ph.D. – Branch, Section Chief

Have

State-of-the-art instruments and techniques for real-time imaging of brain chemistry and function in humans and experimental animals (PET, fMRI).

Seek

New receptor ligand development for nicotinic (a4 b 2, a7), cannabinoid CB1, opioid, and dopaminergic D1/D2 /D3 receptors.

Recent Examples

- Collaboration with Trinity College, Dublin, Ireland, on cognitive task development in healthy controls (Dublin) and applications (e.g., response inhibition in cocaine addicts) using fMRI in drug-dependent individuals (Baltimore).
- Collaboration with Institute of Psychiatry, Kings College (London) on the affective (emotion) effects of marijuana.
- Collaboration with Cambridge University (Cambridge) on implicit memory deficits in cocaine addiction.

Clinical Pharmacology and Therapeutics Research Branch

Kenzie Preston, Ph.D. – Acting Branch Chief, Section Chief
David A. Gorelick, M.D., Ph.D. – Section Chief
Marilyn Huestis, Ph.D. – Acting Section Chief

Have

- State-of-the-art questionnaires for collection of self-report data from users of licit (tobacco/nicotine) and illicit (e.g., marijuana, heroin, cocaine) drugs in inpatient and outpatient studies.
- State-of-the-art gas-chromatography mass spectrometry and liquid chromatography tandem mass spectrometry methods for the analysis of illicit drugs and metabolites in biological fluids and tissues.
- Mathematical models for differentiating new drug use from residual drug excretion.
- Conceptual designs for monitoring blood, urine, oral fluid, sweat, and hair in pregnant drug addicts during gestation and detection of *in utero* drug exposure in the infant.

Seek

- Collaborators able to translate questionnaires into their native language and administer them to samples of drug users of various ages from a variety of locations, including reports of experiences with withdrawal and coping techniques.
- Controlled drug administration studies in humans.
- *In utero* drug exposure of licit pharmacotherapies and illicit drugs.
- Biological monitoring in treatment studies.
- Driving under the influence of drugs.
- Workplace drug testing.
- Anti-doping studies.
- Alternative routes of cannabinoid agonist delivery.
- Cannabinoid antagonist administration studies.

Recent Examples

- Collaboration with a French investigator who is creating a French-language version of the questionnaire.
- Discussions with colleagues in Latin America about translating the questionnaire into Spanish, collecting data at various sites using the same instrument, and sending the data to NIDA for analysis and cross-site comparisons.

Contact Us

Steven R. Goldberg, Ph.D.
Section Chief, Preclinical Pharmacology
Behavioral Neuroscience Research Branch
NIDA Intramural Research Program
5500 Nathan Shock Drive, Room 319
Baltimore, Maryland 21224, U.S.A.

Phone: +1-410-550-1522
Fax: +1-410-550-1563
Email: sgoldber@intra.nida.nih.gov

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AIDS Research Program

Mission Statement

NIDA's AIDS Research Program (ARP) supports the development, planning, and coordination of HIV/AIDS priority research within NIDA's intramural and extramural programs, as well as with other NIH Institutes and DHHS agencies, to achieve an integrated vision and strategy to guide HIV/AIDS research throughout NIDA.

ARP Goals

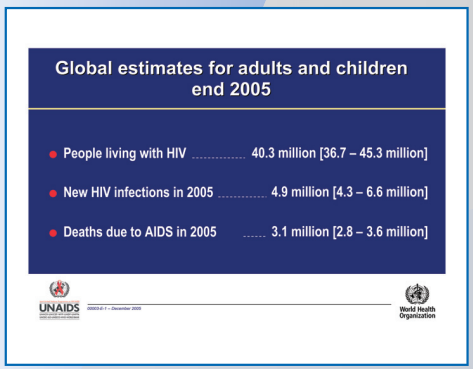
ARP provides direction and leadership for the development of an innovative and multidisciplinary HIV/AIDS research portfolio that addresses the unique dimensions of drug use and abuse as they relate to HIV/AIDS. The development and implementation of NIDA's HIV/AIDS research program is guided by the role of drug use and its related behaviors in the evolving dynamics of HIV/AIDS epidemiology, natural history/pathogenesis, treatment, and prevention, in coordination with the current priorities and objectives of the NIH Office of AIDS Research (OAR) strategic plan for HIV/AIDS research.

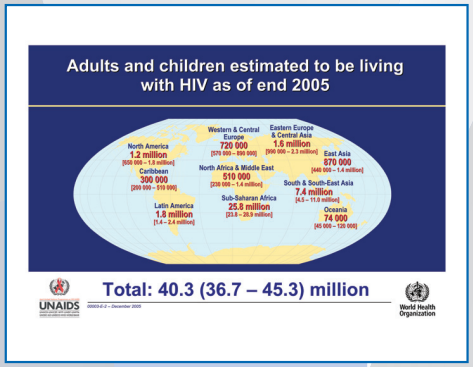
International Focus

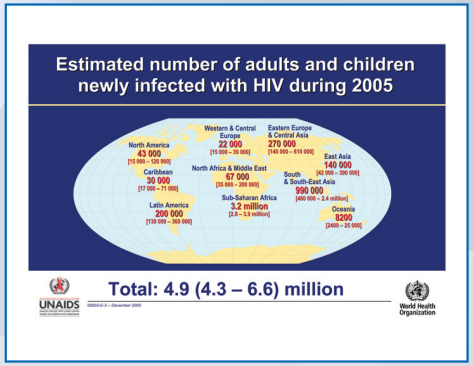
AIDS knows no borders; it is an international as well as a U.S. public health threat. HIV/AIDS has now become a pandemic; worldwide, more than 25 million people have already died. More than 40 million people are estimated to be living with HIV/AIDS. While AIDS is a global phenomenon, the nature of the epidemic varies geographically and risk factors vary within and across populations. NIDA supports international research to elucidate the pivotal role of drug use and abuse in the transmission and progression of HIV/AIDS and to evaluate preventive interventions such as drug abuse treatment.

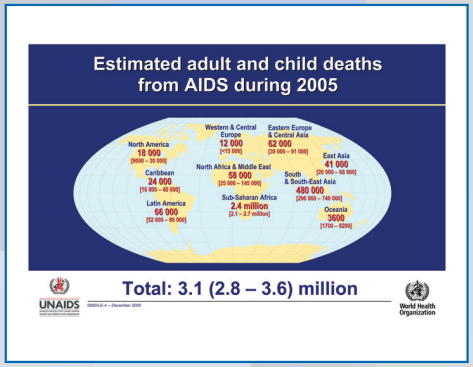
International Funding Priorities

- Development of new methods for gathering HIV epidemiological data and tracking HIV diffusion
- Development of prevention strategies addressing HIV/IDU epidemics in different geographic areas (Russia, China, Southeast Asia, India, Eastern/Central Europe)
- Assessment of drug treatment as HIV prevention
- Development of models for combined HIV and drug treatment
- Impact of emerging drugs (e.g., methamphetamine) and development of interventions
- Prevention strategies among adolescents (e.g., vulnerability of young women, young male injectors)
- HIV/HCV co-infection









Contact Us
Lynda Erinoff
AIDS Research Program
National Institute on Drug Abuse
6001 Executive Boulevard
Room 5274, MSC 9581
Bethesda, Maryland 20892-9581, U.S.A.
Phone: +1-301-402-1972
Fax: +1-301-443-9127
Email: le30q@nih.gov

NATIONAL INSTITUTES OF HEALTH
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

NIDA NATIONAL INSTITUTE ON DRUG ABUSE
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Center for the Clinical Trials Network

Mission Statement

The mission of the Center for the Clinical Trials Network is to improve the quality of drug abuse treatment throughout the nation using science as the vehicle.

CCTN Goals

The Center for the Clinical Trials Network (CCTN) is responsible for the scientific, administrative, budgetary, and operational oversight of the CTN. Together the CTN and the CCTN provide a foundation for conducting research with the primary goal of bridging the gap between the science of drug treatment and its practice through the study of scientifically based interventions in real-world settings.

Research Interests

The CTN provides an infrastructure in which treatment researchers, community-based service providers, and the National Institute on Drug Abuse (NIDA) collaboratively develop, validate, refine, and deliver efficacious drug abuse treatment options to patients in community-level clinical practice.

This unique partnership between community treatment providers and academic research leaders enables the network to develop interventions that are more transferable, acceptable, and sustainable in the drug abuse treatment community. These new interventions may provide evidence-based tools for practitioners to enhance treatment outcomes.

Website: http://www.nida.nih.gov/CTN/Index.htm

The CTN is a part of the NIDA Blending Initiative. The goal of the initiative is to blend resources, information, and talent through a joint effort between NIDA and the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT). The interagency agreement called the NIDA/SAMHSA-ATTC Blending Initiative is designed to meld science and practice together to improve drug abuse and addiction treatment. The international community can get involved in this initiative and benefit from the training manuals and packages that have been developed.

Examples include:

- Buprenorphine Awareness
- S.M.A.R.T. Treatment Planning
- Motivational Interviewing
- Buprenorphine Detoxification
- Promoting Awareness of Motivational Incentives (PAMI)

Website: http://www.nida.nih.gov/Blending/

International Focus

The CTN is working with the NIDA International Program to explore possible low-cost or no-cost avenues to extend Network participation at an international level. Current ideas include:

- Encouraging the CTN researchers and practitioners to include international counterparts in CTN research activities;
- Encouraging the use of CTN database for secondary analysis by international researchers and practitioners;
- Expanding training/dissemination opportunities to include foreign participants; and
- Sharing the CTN research expertise and research protocols upon completion of the studies with the international drug abuse treatment community.

Potential Opportunities

CTN as a Translational Research Expert Resource

The CTN, with its core of CTPs engaging diverse populations, has gained substantial experience in translating behavioral and pharmacotherapeutic drug abuse treatment research into drug abuse practice. These experiences are invaluable to the international drug abuse community. The CTN encourages international drug abuse researchers or practitioners to contact CTN RRTCs or CTPs for their technical support in similar research settings. An example includes, but is not limited to, using the CTN protocols to conduct similar studies at remote international sites.

CTN as an International Training Resource

In order to support the CTN research activities, CTN has established a U.S. national training network with locally recognized master trainers as well as trainers in GCP, ASI, CIDI, and other research instruments. These training opportunities can be readily shared with the international drug abuse research/treatment community.

Data Sharing

In order to expedite the translation of research results into knowledge, products, and procedures to improve public health, the CTN will make study data available to the public. Data sets for CTN protocols will be available after (1) the protocol study team publishes their main study findings, or (2) the data are locked for more than 18 months, whichever comes first. The international community can initiate independent or collaborative secondary data analysis using CTN research data. The first series of data will be available summer 2006.

Contact Us
Katia Delrahim, MPP
Research Associate
Center for the Clinical Trials Network
DB Consulting, Inc.
National Institute on Drug Abuse
6001 Executive Boulevard, Room 3130, MSC 9557
Bethesda, Maryland 20892-9557, U.S.A.

Phone: +1-301-496-9004
Fax: +1-301-443-2317
E-Mail: kdelrahi@nida.nih.gov
Website: http://www.nida.nih.gov/about/organization/CTN/Index.html

NATIONAL INSTITUTES OF HEALTH
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The Science of Drug Abuse & Addiction

Special Populations Office

SPO Goals

In 1993, NIDA established the Special Populations Office (SPO) to address

- The underrepresentation of research on drug abuse and addiction as it affects racial/ethnic minority and other special populations groups.
- The underrepresentation of racial/ethnic minority scientists involved in NIDA-supported and other drug abuse research.

The SPO has made concerted efforts to develop and support programs and initiatives that address the development of racial ethnic/minority scientists and the scientific knowledge base on drug abuse and addiction in racial/ethnic minority groups and other special populations. These efforts have been executed through a number of programs, initiatives, and workgroups including:

- Research Supplements to Promote Diversity and Health-Related Research ("Diversity Supplements")
- Special Populations Research Development Seminar Series
- Summer Research with NIDA
- Minority Research Training Program
- The Minority Institutions' Drug Abuse Research Program (MIDARP)
- Minority Workgroups of Researchers and Scholars
- Health Disparities Initiative
- Historically Black Colleges and Universities Initiative (HBCU)
- Southern Africa Initiative
- African American Initiative

Contact Us

Lula Beatty
Chief, Special Populations Office
National Institute on Drug Abuse
6001 Executive Boulevard
Room 4216, MSC 9567
Bethesda, Maryland 20892-9567 U.S.A.

Phone: +1-301-443-0441
Fax: +1-301-480-8179
Email: lb75x@nih.gov

International Focus

The Special Populations Office is not a program office and does not have a wealth of ongoing international activities. However, the office is home to the Southern Africa Initiative, which was created several years ago, and is active in NIDA's newly formed Latin American Initiative.

- **Southern Africa Initiative**

  The Southern Africa Initiative's primary goal is to stimulate bi-national collaborative drug abuse research between the United States and Southern Africa in the areas of:

  - Epidemiology
  - Early interventions
  - Clinical, prevention, treatment, and health services research aimed at reducing drug abuse and addiction and its associated adverse behavioral, social, and health consequences (e.g., violence and infectious diseases such as HCV, HIV/AIDS, or pulmonary diseases).

  Currently, the Special Populations Office is planning a follow-up meeting to assess the progress and outcomes of NIDA-supported research in Southern Africa since the initiative's inception. At the meeting, the next steps that NIDA should take in regard to the Southern Africa Initiative will also be discussed.

- **Latin America Initiative**

  The Latin America Initiative is a multi-component set of activities designed to enhance the research and research capabilities of Latin American countries. The activities include those to:

  - Increase training in medical schools and schools of nursing on early detection and evaluation of drug use disorders
  - Increase training in secondary data analysis to mine existing data sets to provide information useful to policy makers
  - Increase access to NIDA materials in Spanish
  - Increase training and participation in clinical trials
  - Improve and stimulate the creation of regional networks to improve surveillance and research.

  The Special Populations Office works closely with the International Program and other components of the Latin America Initiative. Of particular importance is the role of the Special Populations Office in assisting NIDA in identifying and interacting with other Federal partners working in the region, and in coordinating the role of the National Hispanic Science Network in implementing the initiative.

National Institute on Drug Abuse
National Institutes of Health
U.S. Department of Health and Human Services
6001 Executive Boulevard, Room 5274
Bethesda, Maryland 20892, U.S.A.
Phone: +1-301-443-6480
Fax: +1-301-594-5687
Email: ip@nida.nih.gov
Website: www.international.drugabuse.gov